PART B-ISSUE FEE TRANSMITTAL

P parties form, together with applicable fees, to:

Box ISSUE FEE Assistant Commissioner for Patents Washington, D.C. 20231

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MAILING INSTRUCTIONS his form should be used for transmitting the ISSUE FEE. Blocks 1 through a hould be considered where appropriate. All further correspondence including the Issue Fee Receipt, the Feeth Covance orders and notification of maintenance fees will be mailed to the current correspondence address as indicated unless corrected below or directed otherwise in Block 1, by (a) specifying a new correspondence address; and/or (b) indicating a separate "FEE ADDRESS" for maintenance fee notifications.

CURRENT CORRESPONDENCE ADDRESS (Note: Legibly mark-up with any corrections or use Block 1)

MMC1/0828

Kaardal & Associates PC Attn Ivar M Kaardal 3500 South First Ave Circle Suite 250 Sioux Falls SD 57105-5807

Note: The certificate of mailing below can only be used for domestic mailings of the Issue Fee Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing.

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I hereby certify that this Issue Fee Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Box Issue Fee address above on the date indicated below.

			11/28/61	(Date)
APPLICATION NO.	FILING DATE	TOTAL CLAIMS	EXAMINER AND GROUP ART UNIT	DATE MAILED
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ATTY'S DOCKET NO.	CLASS-SUBCLASS	BATCH NO.	APPLN. TYPE	SMALL ENTITY	FEE DUE	DATE DUE	
2 99-0917	362-473.000	L20	UTILITY	YES \$	620.00	11/28/01	
Use of PTO form(s) and Customer Number are recommended, but not required. Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47) attached.				nting on the patent front page, list times of up to 3 registered patent or agents OR, alternatively, (2) of a single firm (having as a a registered attorney or agent) arms of up to 2 registered patent or agents. If no name is listed, no be printed.			
3. ASSIGNEE NAME AND RESIDEN PLEASE NOTE: Unless an assigne Inclusion of assignee data is only a the PTO or is being submitted unde filling an assignment. (A) NAME OF ASSIGNEE (B) RESIDENCE: (CITY & STATE (Please check the appropriate assigned individual corporation of	ee is identified below, no assign appropiate when an assignment er separate cover. Completion OR COUNTRY)	ee data will appea has been previous of this form is NOT will not be printed o	r on the patent. sty submitted to a substitue for 4b.	of Patents and Tradem Issue Fee Advance Order - # 0	arks): of Copies leficiency in these fe NUMBER A COPY OF THIS F	eck payable to Commissioner ees should be charged to: ORIM)	
THE COMMISSIONER OF PATENTS	AND TRADEMARKS IS reques	ted to apply the Is					
NOTE; The issue Fee will not be accept or agent, or the assignee or other part trademark Office.	pled from anyone other than th	(Date	28/01 stered attorney			7	
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